

CABINET FOR HEALTH AND FAMILY SERVICES DEPARTMENT FOR MEDICAID SERVICES

Matthew G. Bevin Governor

275 E Main St, 6W-A Frankfort, KY 40621 Phone: (502) 564-4321 Fax: (502) 564-0509 www.chfs.ky.gov Vickie Yates Brown Glisson Secretary

Stephen P. Miller Commissioner

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TO: Medicaid Providers

Behavioral Health Service Organization (03) – Provider Letter #A-5 Licensed Professional Art Therapist (62) – Provider Letter #A-4

Applied Behavior Analyst (63) - Provider Letter #A-4

Behavioral Health Multi-Specialty Group (66) – Provider Letter #A-5 Licensed Professional Clinical Counselor (81) – Provider Letter #A-6

Licensed Clinical Social Worker (82) – Provider Letter #A-12

Licensed Marriage and Family Therapist (83) – Provider Letter #A-6 Licensed Psychological Practitioner (84) – Provider Letter #A-5

Licensed Psychologist (89) - Provider Letter #A-12

RE: Revised Fee Schedules

Behavior Analysis Services

Therapeutic Rehabilitation Program and Day Treatment Services

Dear Behavioral Health Providers:

In response to multiple inquiries from our behavioral health and substance use provider community, the Department for Medicaid Services (DMS) provides the following information.

REVISED FEE SCHEDULE

DMS corrected errors contained in the Mental Health Substance Abuse Services provider fee schedules for services provided to fee-for-service members. The revised fee schedules are posted on our website and may be accessed at the following web address: http://chfs.ky.gov/dms/fee.htm.

BEHAVIOR ANALYSIS SERVICES

Additionally, DMS added codes and reimbursement rates to the Mental Health Substance Abuse fee schedules for providers rendering behavior analysis services to fee-for-service members. Please see the following table which outlines these additions and changes:

State Plan and Regulation Language	Suggested HCPCS Codes for Services Rendered	Behavior Analyst Service Definitions
Individual Therapy	H2019, Therapeutic behavioral services, 15 minutes	Adaptive behavior treatment; with protocol modification
Assessment	H0031, Mental Health Assessment, by non-physician	Behavior identification assessment

State Plan and Regulation Language	Suggested HCPCS Codes for Services Rendered	Behavior Analyst Service Definitions
	H0032, Mental health service plan	
Service Planning	development by non-physician	Service Planning
		Multiple-family group
	H0025, Behavioral health	adaptive behavior
1	prevention education service	treatment guidance and
	(delivery of service with target	adaptive behavior
	population to affect knowledge,	treatment social skills
Group Therapy	attitude and/or behavior)	group
	H2027, Psychoeducational service,	Family adaptive behavior
Collateral Therapy	per 15 minutes	treatment guidance
	. == -: .===	Exposure adaptive
Comprehensive	H2015, Comprehensive community	behavior treatment; with
Community Support	support services, 15 minutes	protocol modification

THERAPEUTIC REHABILITATION PROGRAM AND DAY TREATMENT SERVICES

DMS is providing clarification regarding the definitions of Therapeutic Rehabilitation Program (H2019) and Day Treatment (H2012).

Therapeutic Rehabilitation Program (TRP) services are:

- Adults diagnosed with a Severe Mental Illness (SMI) or an individual under the age of 21 who
 has a serious emotional disability (SED).
- Should maximize the reduction of the effects of mental health disorder and the restoration of the individual's functional level to the best possible level.
- The individual establishes their own rehabilitation goals.
- Is delivered utilizing a variety of psychiatric rehabilitation techniques.
- Focus is on the improvement of daily living skills, self-monitoring of symptoms and side effects, emotional regulation skills, crisis coping skills and interpersonal skills.
- May be delivered individually or in a group.

Day treatment services are:

For individuals under the age of 21.

- Individuals must have a mental health, substance use or co-occurring mental health and substance use disorder.
- Individuals must be at a high risk of out-of-home placement due to behavioral health issues.
- Individual outpatient therapy, family outpatient therapy or group outpatient therapy is included.
- Includes behavior management, social skills training and developmentally appropriate independent living skills.
- Link with community resources prior to discharge.
- Is provided in collaboration with education services.
- Provided on school days and during scheduled school breaks.
- Provided in coordination with the individual's educational plan or Section 504 plan, if applicable.
- Does NOT include therapeutic clinical service that is included in the student's individualized education plan or Section 504 plan.

Documentation of any service provided must follow the applicable regulation. In addition, TRP and Day Treatment services should not be billed when another Medicaid billable service is being provided. Providers should also verify if a prior authorization is required by a Managed Care Organization.

Should you have any questions regarding this information or require further clarification, please email DMS at DMS.lssues@ky.gov.

Sincerely,

Stephen P. Miller, Commissioner

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